

Form 990

Return of Organization Exempt From Income Tax

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2004

Open to Public
Inspection

A For the 2004 calendar year, or tax year beginning 2004, and ending

B Check if applicable:

☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

SACRAMENTO NEIGHBORHOOD HOUSING SERVICES

Number and street (or P.O. box if mail is not delivered to street address)

Room/suite

P.O. BOX 5420

City or town, state or country, and ZIP + 4

SACRAMENTO, CA 95817

D Employer identification number

68-0118032

E Telephone number

(916) 452-5361

F Accounting method:

☐ Cash☒ Accrual

Other (specify) ▶

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☐ No

(If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

I Group Exemption Number ▶

M Check ☒ If the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: WWW.SACNHS.ORG

J Organization type (check only one) ☒ 501(c)(3) (insert no.) 4947(a)(1) or 527K Check here ☐ If the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 1,299,695.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

1 Contributions, gifts, grants, and similar amounts received:					
a Direct public support	1a	321,316.			
b Indirect public support	1b				
c Government contributions (grants)	1c	470,295.			
d Total (add lines 1a through 1c) (cash \$ 791,611. noncash \$)	1d	791,611.			
2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	227,621.			
3 Membership dues and assessments	3				
4 Interest on savings and temporary cash investments	4	11,481.			
5 Dividends and interest from securities	5				
6 a Gross rents	6a	5,834.			
b Less: rental expenses	6b				
c Net rental income or (loss) (subtract line 6b from line 6a)	6c	5,834.			
7 Other investment income (describe ▶)	7				
8 a Gross amount from sales of assets other than inventory	(A) Securities	8a	222,500.		
b Less: cost or other basis and sales expenses	8b	133,978.			
c Gain or (loss) (attach schedule)	8c	88,522.			
d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	88,522.			
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>					
a Gross revenue (not including \$ 112,593. of STMT 1 contributions reported on line 1a) STMT 2.	9a	40,536.			
b Less: direct expenses other than fundraising expenses	9b	87,796.			
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c	-47,260.			
10 a Gross sales of inventory, less returns and allowances	10a				
b Less: cost of goods sold	10b				
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c				
11 Other revenue (from Part VII, line 103)	11	112.			
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	1,077,921.			
13 Program services (from line 44, column (B))	13	688,461.			
14 Management and general (from line 44, column (C))	14	59,236.			
15 Fundraising (from line 44, column (D))	15	56,864.			
16 Payments to affiliates (attach schedule)	16				
17 Total expenses (add lines 13 and 14, column (A))	17	804,561.			
18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	273,360.			
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	4,218,157.			
20 Other changes in net assets or fund balances (attach explanation) STMT 3	20	31,576.			
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	4,523,093.			

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2004)

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
(cash \$ _____ noncash \$ _____)	22				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	162,713.	151,323.	8,136.	3,254.
26	Other salaries and wages	296,514.	274,337.	14,885.	7,292.
27	Pension plan contributions	11,171.	10,233.	645.	293.
28	Other employee benefits	32,436.	31,385.	NONE	1,051.
29	Payroll taxes	39,747.	36,965.	1,987.	795.
30	Professional fundraising fees				
31	Accounting fees	15,000.	13,000.	1,375.	625.
32	Legal fees				
33	Supplies				
34	Telephone				
35	Postage and shipping	5,137.	4,392.	512.	233.
36	Occupancy	42,696.	35,957.	4,599.	2,140.
37	Equipment rental and maintenance				
38	Printing and publications	9,585.	9,395.	149.	41.
39	Travel	1,050.	1,016.	24.	10.
40	Conferences, conventions, and meetings	4,950.	3,372.	215.	1,363.
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)	7,860.		7,860.	
43	Other expenses not covered above (itemize): <u>STMT 4</u>	175,702.	117,086.	18,849.	39,767.
b					
c					
d					
e					
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	804,561.	688,461.	59,236.	56,864.

Joint Costs. Check ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____.

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)What is the organization's primary exempt purpose? STMT 5

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

What is the organization's primary exempt purpose? <u>STMT 5</u>		Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a	<u>STMT 6</u>	
	(Grants and allocations \$ _____)	277,309.
b	(Grants and allocations \$ _____)	321,511.
c	(Grants and allocations \$ _____)	89,641.
d	(Grants and allocations \$ _____)	
e	Other program services (attach schedule) (Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	688,461.

Part IV Balance Sheets (See page 25 of the instructions.)**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	492,713.	45	572,602.
	46 Savings and temporary cash investments	1,401,903.	46	1,484,920.
	47a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	47c	
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable	225,381.	49	35,805.
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule) STMT 7.	51a 2,668,575.		
	b Less: allowance for doubtful accounts	51b 50,000.	51c	2,618,575.
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges STMT 8.	2,922.	53	3,457.
	54 Investments - securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55a Investments - land, buildings, and equipment: basis	55a		
	b Less: accumulated depreciation (attach schedule)	55b	55c	
56 Investments - other (attach schedule)		56		
57a Land, buildings, and equipment: basis	57a 120,481.			
b Less: accumulated depreciation (attach schedule)	57b 103,553.	57c	16,928.	
58 Other assets (describe <input type="checkbox"/> STMT 9.)	278,239.	58	192,484.	
59 Total assets (add lines 45 through 58) (must equal line 74)	4,404,996.	59	4,924,771.	
Liabilities	60 Accounts payable and accrued expenses	38,256.	60	32,863.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule) STMT 10.	125,000.	64b	350,000.
	65 Other liabilities (describe <input type="checkbox"/> STMT 11.)	23,583.	65	18,815.
66 Total liabilities (add lines 60 through 65)	186,839.	66	401,678.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	585,467.	67	637,341.
	68 Temporarily restricted		68	
	69 Permanently restricted	3,632,690.	69	3,885,752.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	4,218,157.	73	4,523,093.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	4,404,996.	74	4,924,771.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A **Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)**

a Total revenue, gains, and other support per audited financial statements . . . ▶		a	1,185,040.
b Amounts included on line a but not on line 12, Form 990:			
(1) Net unrealized gains on investments . . . \$ _____			
(2) Donated services and use of facilities \$ _____			
(3) Recoveries of prior year grants \$ _____			
(4) Other (specify): _____			
STMT 12 \$ 107,119.			
Add amounts on lines (1) through (4) ▶		b	107,119.
c Line a minus line b ▶		c	1,077,921.
d Amounts included on line 12, Form 990 but not on line a:			
(1) Investment expenses not included on line 6b, Form 990 . . . \$ _____			
(2) Other (specify): _____			
Add amounts on lines (1) and (2) . . ▶		d	
e Total revenue per line 12, Form 990 (line c plus line d) ▶		e	1,077,921.

Part IV-B	Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
------------------	---

a	Total expenses and losses per audited financial statements ▶	a	880,104.
b	Amounts included on line a but not on line 17, Form 990:		
	(1) Donated services and use of facilities \$ _____		
	(2) Prior year adjustments reported on line 20, Form 990 \$ _____		
	(3) Losses reported on line 20, Form 990 \$ _____		
	(4) Other (specify): _____		
	<u>STMT 13</u> \$ 75,543.		
	Add amounts on lines (1) through (4) . . ▶	b	75,543.
c	Line a minus line b ▶	c	804,561.
d	Amounts included on line 17, Form 990 but not on line a:		
	(1) Investment expenses not included on line 6b, Form 990 . . . \$ _____		
	(2) Other (specify): _____		
	_____ \$ _____		
	Add amounts on lines (1) and (2) . . ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	804,561.

Part V	List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the instructions.)	(line c plus line d)	e	804,561.
---------------	---	--------------------------------	----------	-----------------

[illegible]

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? **►** ☐ Yes ☒ No
If "Yes," attach schedule - see page 28 of the instructions.

Part VI Other Information (See page 2 of the instructions.)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a Enter direct and indirect political expenditures. See line 81 instructions.	81a	NONE
b Did the organization file Form 1120-POL for this year?	81b	X
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	13,062.
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	N/A
c Dues, assessments, and similar amounts from members	85c	N/A
d Section 162(e) lobbying and political expenditures	85d	N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87 501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	N/A
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	N/A
89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> NONE ; section 4912 <input type="checkbox"/> NONE ; section 4955 <input type="checkbox"/> NONE		
b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		NONE
d Enter: Amount of tax on line 89c, above, reimbursed by the organization		NONE
90 a List the states with which a copy of this return is filed <input checked="" type="checkbox"/> CALIFORNIA		
b Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)	90b	11
91 The books are in care of <input checked="" type="checkbox"/> LINDA CARROLL Located at <input checked="" type="checkbox"/> 3453 5TH AVENUE, SACRAMENTO, CA Telephone no. <input checked="" type="checkbox"/> 916-452-5361		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	NONE

Note: Enter gross amounts unless otherwise indicated.

Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:				
a LOAN INTEREST				111,913.
b LOAN FEES				100,733.
c INSPECTION FEES				250.
d BUYER DEV FEE				14,725.
e				
f Medicare/Medicaid payments				
g Fees and contracts from government agencies				
94 Membership dues and assessments				
95 Interest on savings and temporary cash investments		14	11,481.	
96 Dividends and interest from securities				
97 Net rental income or (loss) from real estate:				
a debt-financed property		16	5,834.	
b not debt-financed property				
98 Net rental income or (loss) from personal property				
99 Other investment income				
100 Gain or (loss) from sales of assets other than inventory				
101 Net income or (loss) from special events		01	-47,260.	88,522.
102 Gross profit or (loss) from sales of inventory				
103 Other revenue: a				
b MISCELLANEOUS		01	112.	
c				
d				
e				
104 Subtotal (add columns (B), (D), and (E))			-29,833.	316,143.
105 Total (add line 104, columns (B), (D), and (E))				286,310.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A-	INTEREST AND FEE INCOME IS USED IN MAKING FURTHER LOW
93D	INTEREST LOANS TO OWNER OCCUPANTS UNDER THE OWNER OCCUPIED
	REHABILITATION PROGRAMS.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please
Sign
Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer *[Signature]* Date *5-11-08*
Type or print name and title. *Pam Canada CEO*

Paid
Preparer's
Use Only

Preparer's signature *[Signature]* Date *5/11/08* Check if self-employed ☐ Preparer's SSN or PTIN (See Gen. Inst. W) P00022122
Firm's name (or yours if self-employed), address, and ZIP + 4 BURNETT + COMPANY LLP
2870 GOLD TAILINGS CT., SUITE A
RANCHO CORDOVA, CA 95670-6106 EIN 94-2880151
Phone no. 916-638-1188

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2004

Name of the organization

SACRAMENTO NEIGHBORHOOD HOUSING SERVICES

Employer identification number

68-0118032

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	NONE			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
RAYMOND HUNTER		
6700 SUN RIVER DR, SACRAMENTO, CA 95828	CONSTRUCTION SERVICE	65,925.
Total number of others receiving over \$50,000 for professional services	NONE	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

JSA

Schedule A (Form 990 or 990-EZ) 2004

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B.)		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . FORM 990 - PART V	2d	X
e Transfer of any part of its income or assets?	2e	X
3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a	X
b Do you have a section 403(b) annuity plan for your employees?	3b	X
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a	X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ _____
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.***Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,206,567.	1,174,586.	1,030,215.	890,750.	4,302,118.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	34,345.	33,768.	22,886.	24,189.	115,188.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	STMT 16 195,278.	286,822.	132,300.	132,048.	746,448.
23 Total of lines 15 through 22	1,436,190.	1,495,176.	1,185,401.	1,046,987.	5,163,754.
24 Line 23 minus line 17	1,436,190.	1,495,176.	1,185,401.	1,046,987.	5,163,754.
25 Enter 1% of line 23	14,362.	14,952.	11,854.	10,470.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 103,275.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 5,163,754.
d Add: Amounts from column (e) for lines: 18 115,188. 19					26d 861,636.
22 746,448. 26b					26e 4,302,118.
e Public support (line 26c minus line 26d total)					26f 83.3138 %
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:	(2003) _____ (2002) _____ (2001) NOT APPLICABLE (2000) _____				
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:	(2003) _____ (2002) _____ (2001) _____ (2000) _____				
c Add: Amounts from column (e) for lines: 15 16					27c
17 20 21					27d
d Add: Line 27a total and line 27b total					27e
e Public support (line 27c total minus line 27d total)					27f
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27g %
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27h %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 7 of the instructions.)**NOT APPLICABLE**(To be completed **ONLY** by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) _____ _____ _____	31	
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) _____ _____ _____		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) _____ _____ _____		
34 a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768) **NOT APPLICABLE**Check ☐ a If the organization belongs to an affiliated group. Check ☐ b If you checked "a" and "limited control" provisions apply.**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying) . . .	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying) . . .	37		
38 Total lobbying expenditures (add lines 36 and 37) . . .	38		
39 Other exempt purpose expenditures . . .	39		
40 Total exempt purpose expenditures (add lines 38 and 39) . . .	40		
41 Lobbying nontaxable amount. Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is -			
Not over \$500,000 20% of the amount on line 40	} 41		
Over \$500,000 but not over \$1,000,000 . . . \$100,000 plus 15% of the excess over \$500,000			
Over \$1,000,000 but not over \$1,500,000 . . . \$175,000 plus 10% of the excess over \$1,000,000			
Over \$1,500,000 but not over \$17,000,000 . . . \$225,000 plus 5% of the excess over \$1,500,000			
Over \$17,000,000 \$1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41) . . .	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 . . .	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 . . .	44		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.**4-Year Averaging Period Under Section 501(h)**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45 through 50 on page 11 of the instructions.)**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e)) . . .					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e)) . . .					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities**NOT APPLICABLE**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.) . . .			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 11 of the instructions.)

Yes	No
-----	----

	Yes	No
51a(i)		X

a(ii)		X
-------	--	---

--	--	--

b(i)	X
-------------	----------

b(II)		X
-------	--	---

b(iii)		x
---------------	--	----------

b(iv)		x
-------	--	---

$b(v)$		x
--------	--	-----

b(vi)		x
-------	--	---

C		X
---	--	---

e of the

[illegible]

► ☐ Yes ☒ No

(c)
Description of relationship

[illegible]

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION -----	GROSS REVENUE -----	DIRECT EXPENSES -----	NET INCOME -----
FIREWORKS SALE	27,636.	22,247.	5,389.
TOY DRIVE	NONE	5,106.	-5,106.
GOLF TOURNAMENT	NONE	40,257.	-40,257.
PAINT THE TOWN	840.	10,596.	-9,756.
HOME SAFETY CALENDAR	12,060.	9,590.	2,470.
TOTALS	40,536.	87,796.	-47,260.

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES

DESCRIPTION

AMOUNT

CORRECTION TO AMOUNTS MISTAKENLY BOOKED
IN PRIOR YEAR AS RECEIVABLE AND LATER
DEEMED UNCOLLECTIBLE
IN-KIND CONTRIBUTIONS

18,514.

13,062.

TOTAL

31,576.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION -----	TOTAL -----	PROGRAM SERVICES -----	MANAGEMENT AND GENERAL -----	FUNDRAISING -----
PROFESSIONAL SERVICES	45,463.	40,513.	3,403.	1,547.
TRAINING	6,223.	5,900.	222.	101.
DUES & SUBSCRIPTIONS	5,290.	4,479.	558.	253.
SERVICE CONTRACTS	5,845.	5,176.	460.	209.
RESOURCE DEVELOPMENT	36,000.	NONE	NONE	36,000.
NEIGHBORHOOD IMPROVEMENT	15,205.	15,205.	NONE	NONE
LOAN SERVICING	3,919.	3,919.	NONE	NONE
CREDIT REPORTS	3,012.	3,012.	NONE	NONE
PROJECT SUPPLIES	1,354.	1,354.	NONE	NONE
WORKSHOP EXPENSE	11,138.	11,138.	NONE	NONE
TRUCK EXPENSE	2,136.	2,133.	2.	1.
COMMUNICATION	6,098.	5,122.	671.	305.
OFFICE SUPPLIES	11,688.	10,187.	1,032.	469.
INSURANCE	10,893.	131.	10,762.	NONE
DONOR RECOGNITION EXPENSE	1,242.	268.	974.	NONE
BANK CHARGES	1,647.	1,616.	29.	2.
MISCELLANEOUS	4,289.	3,690.	580.	19.
COMPUTER EXPENSE	580.	487.	64.	29.
FUNDRAISING	790.	NONE	NONE	790.
SPECIAL EVENTS	1,066.	1,066.	NONE	NONE
REPAIRS	738.	620.	81.	37.
MILEAGE & PARKING	1,086.	1,070.	11.	5.
TOTALS	175,702.	117,086.	18,849.	39,767.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

=====

IMPROVE AND RESTORE NEIGHBORHOODS DISTRICT WIDE PRIMARILY FOR THE
BENEFIT OF THE NEIGHBORHOOD RESIDENTS.

FORM 990, PART III - PROGRAM SERVICE ACCOMPLISHMENTS (A THROUGH D)
=====

ITEM	DESCRIPTION	EXPENSES
----	-----	-----
A	COMMUNITY DEVELOPMENT - TO ENHANCE THE PERSONAL SAFETY AND SECURITY OF TARGET NEIGHBORHOOD RESIDENTS AND TO PROVIDE BEAUTIFICATION TO HOMEOWNERS AND OTHER OUTREACH SERVICES. PROGRAMS INCLUDE BLOCK BY BLOCK ORGANIZING, RESIDENT LEADERSHIP DEVELOPMENT, COMMUNITY CLEAN-UPS, NEIGHBORHOOD PAINT PROGRAM, PAINT THE TOWN, FIRE SAFETY ED DAY, ETC.	277,309.
B	HOME OWNERSHIP CENTER - TO BRING NEW HOME OWNERSHIP OPPORTUNITIES TO HOUSEHOLDS OF MODERATE MEANS BY SUPPORTING PRIVATELY FUNDED FIRST MORTGAGES WITH SUBSIDIZED SECOND MORTGAGES. THE HOME OWNERSHIP CENTER PROVIDES HOMEBUYERS AND HOMEOWNER EDUCATION CLASSES, FLEXIBLE LOAN PRODUCTS, AND OTHER LOAN SERVICES.	321,511.
C	LOAN SERVICING CENTER - TO MAINTAIN THE ORGANIZATION'S LOAN PORTFOLIO AND AGREED UPON AMOUNT OF THE LOANS BY AN AGREEMENT WITH FUNDING SOURCES OR INVESTORS. THIS INCLUDES LOAN RENEWALS, LOAN MODIFICATIONS, AND VARIOUS OTHER FUNCTIONS.	89,641.
TOTAL		----- 688,461. =====

FORM 990, PART IV - OTHER NOTES AND LOANS RECEIVABLE
=====

BORROWER: VARIOUS LOANS RECEIVABLES

DATE OF NOTE: VAR

MATURITY DATE: VAR

REPAYMENT TERMS: LOAN TERMS FROM 3-30 YRS, 0%-6.5% INTEREST RATES

SECURITY PROVIDED: DEEDS OF TRUST ON SINGLE-FAMILY RESIDENCES

PURPOSE OF LOAN: HOME OWNERSHIP PROGRAM

BEGINNING BALANCE DUE	2,035,765.
ENDING BALANCE DUE	2,668,575.

TOTAL BEGINNING OTHER NOTES AND LOANS RECEIVABLE	2,035,765.
	=====

TOTAL ENDING OTHER NOTES AND LOANS RECEIVABLES	2,668,575.
	=====

FORM 990, PART IV - PREPAID EXPENSES AND DEFERRED CHARGES
=====

DESCRIPTION -----	ENDING BOOK VALUE -----
PREPAID EXPENSES	3,457. -----
TOTALS	3,457. =====

FORM 990, PART IV - OTHER ASSETS
=====DESCRIPTION
-----ENDING
BOOK VALUE

INTEREST RECEIVABLE-LONG TERM
INTEREST RECEIVABLE-CURRENT
REAL ESTATE INVESTMENT
DEPOSITS

12,522.
10,142.
168,820.
1,000.

TOTALS

192,484.
=====

FORM 990, PART IV - MORTGAGES AND OTHER NOTES PAYABLE

=====

LENDER: WASHINGTON MUTUAL
INTEREST RATE: 4.000000
DATE OF NOTE: VAR
MATURITY DATE: 07/01/2008
REPAYMENT TERMS: QUARTERLY INTEREST-ONLY PAYMENTS
SECURITY PROVIDED: UNSECURED
PURPOSE OF LOAN: TO MAKE LOANS TO LOW & MOD INCOME NEW HOMEBUYERS

BEGINNING BALANCE DUE 25,000.
ENDING BALANCE DUE 250,000.

LENDER: REDEVELOPMENT AGENCY OF SACRAMENTO(OPTI)
INTEREST RATE: 2.000000
DATE OF NOTE: VAR
MATURITY DATE: 02/18/2013
REPAYMENT TERMS: PRINCIPAL & INTEREST BALLOON PAYMENT AT MATURITY
SECURITY PROVIDED: UNSECURED
PURPOSE OF LOAN: PURCHASE & REHAB OF HOMES RESOLD TO OWNER-TENANTS

BEGINNING BALANCE DUE 100,000.
ENDING BALANCE DUE 100,000.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE 125,000.
=====

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE 350,000.
=====

FORM 990, PART IV - OTHER LIABILITIES

=====

DESCRIPTION

ENDING
BOOK VALUE

LOAN CONSTRUCTION ESCROW

13,538.

TAXES & INSURANCE ESCROW

5,277.

TOTALS

18,815.
=====

FORM 990, PART IV-A - OTHER REVENUE ON BOOKS BUT NOT ON RETURN
=====DESCRIPTION
-----AMOUNT

IN-KIND CONTRIBUTIONS

13,062.

EXPENSES OFFSETTING REVENUE

94,057.

TOTAL

107,119.
=====

FORM 990, PART IV-B - OTHER EXPENSES ON BOOKS BUT NOT ON RETURN
=====DESCRIPTION
-----AMOUNT

EXPENSES OFFSETTING REVENUE
PRIOR YEAR ADJUSTMENT TO LOAN
RECEIVABLE REFLECTED IN BOOK
EXPENSES

94,057.

-18,514.

TOTAL

75,543.
=====

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
PAM CANADA 3453 5TH AVENUE SACRAMENTO, CA 95817	EXECUTIVE DIRECTOR 30	91,982.	4,988.	NONE
LINDA CARROLL 5127 T STREET SACRAMENTO, CA 95819	ASSISTANT DIRECTOR 40	70,731.	4,289.	NONE
JOSEPH CONTRERAZ 455 BOWMAN AVENUE SACRAMENTO, CA 95833	PRESIDENT 5	NONE	NONE	NONE
JEFF THOMAS 1901 GOLD CENTER DRIVE, SUITE 400 RANCHO CORDOVA, CA 95670	TREASURER 5	NONE	NONE	NONE
SETH MEREWITZ 555 CAPITOL MALL, 9TH FLOOR SACRAMENTO, CA 95814	BOARD MEMBER 5	NONE	NONE	NONE
GEORGELLA BURNETT-ELLIS 4500 EL CERRITO WAY SACRAMENTO, CA 95820	BOARD MEMBER 5	NONE	NONE	NONE
EDWARD CARDONA 1950 ARDEN WAY, 2ND FLOOR SACRAMENTO, CA 95815	SECRETARY 5	NONE	NONE	NONE
BUD AUNGST 3624 Y STREET SACRAMENTO, CA 95817	2ND VICE PRESIDENT 5	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
ELAINE WILLIAMS 3724 47TH STREET SACRAMENTO, CA 95820	1ST VICE PRESIDENT 5	NONE	NONE	NONE
CHRIS GRAY 8167 GUALA COURT SACRAMENTO, CA 95828	BOARD MEMBER 5	NONE	NONE	NONE
ANNSHERYCE MILTON 2594 AMERICAN AVENUE SACRAMENTO, CA 95833	BOARD MEMBER 5	NONE	NONE	NONE
JIM PRICE 5574 W. BLUFF AVENUE FRESNO, CA 93722	BOARD MEMBER 5	NONE	NONE	NONE
	GRAND TOTALS	162,713.	9,277.	NONE

SCHEDULE A, PART IV-A - OTHER INCOME
=====

DESCRIPTION -----	2003 ----	2002 ----	2001 ----	2000 ----	TOTAL -----
PROGRAM/SPECIAL EVENTS REVENUE	195,278.	286,822.	132,300.	132,048.	746,448.
TOTALS	<u>195,278.</u>	<u>286,822.</u>	<u>132,300.</u>	<u>132,048.</u>	<u>746,448.</u>

Sacramento Neighborhood Housing Services
Depreciation Expense [Depreciation]
GAAP
Detail
For the Period January 1, 2004 to December 31, 2004

Asset ID	Placed In service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depr & AFYD This Period	Beginning Accum Depr	Current Depr & AFYD	YEAR TO DATE Net Sec 179/Sec 179A	Net Additions Deletions	Ending Accum Depr
<i>Class: (no value)</i>										
000065	UNKNOWN ASSET - ADJUSTMENT									
	12/30/2000	SL100FM	7 0	4,503	643	1,983	643	0	0	2,627
<i>Subtotal: (no value) (1)</i>				4,503	643	1,983	643	0	0	2,627
<i>Class: AUTO</i>										
000019	FORD F150 TRUCK									
	08/05/1997	SL100FM	5 0	10,000	0	10,000	0	0	0	10,000
<i>Subtotal: AUTO (1)</i>				10,000	0	10,000	0	0	0	10,000
<i>Class: DONATE</i>										
000013	DONATED SHARP COPIER									
	11/20/1996	SL100FM	7 0	500	0	500	0	0	-500	0
000027	DONATED FURNITURE									
	12/01/1997	SL100FM	7 0	3,500	458	3,042	458	0	0	3,500
Less Disposals				Adjustment to eliminate cost values of disposed assets						
				-500						
<i>Subtotal: DONATE (3)</i>				3,500	458	3,542	458	0	-500	3,500
<i>Class: IMPR</i>										
000026	TENANT IMPROVEMENTS - Main Office									
	11/01/1997	SL100FM	6 0	31,130	0	31,130	0	0	0	31,130
000051	SECURITY SYSTEM ADDITION-Loan Dept.									
	06/08/1998	SL100FM	6 0	536	37	499	37	0	0	536
000052	T.I.'S - Loan Dept.									
	12/09/1998	SL100FM	6 0	4,469	683	3,786	683	0	0	4,469
<i>Subtotal: IMPR (3)</i>				36,135	720	35,415	720	0	0	36,135
<i>Class: OFFC</i>										
000001	TWO-DRAWER FILE									
	08/15/1989	SL100FM	7 0	319	0	319	0	0	0	319
000002	TWO TABLES & FOUR CHAIRS									
	02/22/1990	SL100FM	5 0	374	0	374	0	0	0	374
000004	PANELS									
	12/22/1990	SL100FM	5 0	976	0	976	0	0	0	976
000005	20 X 30' CANOPY									
	11/21/1991	SL100FM	7 0	375	0	375	0	0	0	375
000006	FUND EZ SOFTWARE									
	08/15/1992	SL100FM	5 0	690	0	690	0	0	0	690
000010	CHAIRS									
	04/30/1994	SL100FM	7 0	156	0	156	0	0	0	156
000011	FAX									
	07/30/1994	SL100FM	5 0	2,112	0	2,112	0	0	0	2,112
000014	25" TV / VCR									
	08/10/1996	SL100FM	5 0	474	0	474	0	0	0	474
000015	LOAN BASE SOFTWARE									
	11/01/1996	SL100FM	3 0	4,310	0	4,310	0	0	0	4,310
000020	TELEPHONE SYSTEM									
	09/09/1997	SL100FM	5 0	8,818	0	8,818	0	0	0	8,818
000022	NETWORK SERVER									
	10/07/1997	SL100FM	5 0	3,577	0	3,577	0	0	-3,577	0
000025	FUND EZ SOFTWARE									
	12/24/1997	SL100FM	5 0	590	0	590	0	0	0	590
000028	HP LASER JET 3100SE FAX MACHINE									
	05/11/1998	SL100FM	5 0	722	0	722	0	0	0	722
000029	HP LASER JET 4000 PRINTER									

Asset ID	Placed In service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depr & AFYD This Period	YEAR TO DATE				
						Beginning Accum Depr	Current Depr & AFYD	Net Sec 179/Sec 179A	Net Additions Deletions	Ending Accum Depr
Class: OFFC										
000033	05/11/1998	SL100FM	5 0	1,207	0	1,207	0	0	0	1,207
	MORTGAGEWARE SOFTWARE UPGRADE									
000042	03/18/1998	SL100FM	3 0	812	0	812	0	0	0	812
	PHONE SYS. for LOAN DEPT. (Lucent)									
000043	05/18/1998	SL100FM	5 0	2,081	0	2,081	0	0	0	2,081
	ADD'L PHONES + UPGRADES (Lucent)									
000045	11/04/1998	SL100FM	5 0	1,141	0	1,141	0	0	0	1,141
	WALNUT DESK w/HUTCH #2									
000046	12/09/1998	SL100FM	7 0	350	50	254	50	0	0	304
	WALNUT DESK w/HUTCH #3									
000047	12/09/1998	SL100FM	7 0	350	50	254	50	0	0	304
	WALNUT DESK w/HUTCH #4									
000048	12/09/1998	SL100FM	7 0	350	50	254	50	0	0	304
	RECEPTION WORKSTATION									
000049	12/09/1998	SL100FM	7 0	900	129	654	129	0	0	782
	WALNUT BOOKCASE									
000050	12/09/1998	SL100FM	7 0	90	13	65	13	0	0	78
	TWO WALNUT COAT RACKS									
000053	12/09/1998	SL100FM	7 0	90	13	65	13	0	0	78
	Computer (SUS93205439)									
000054	09/29/1999	SL100FM	5 0	1,220	163	1,057	163	0	0	1,220
	SERVER									
000058	08/03/1999	SL100FM	5 0	989	49	873	49	0	-923	0
	COPIER - DIGITAL DUPLEX									
000066	11/15/1999	SL100FM	7 0	12,919	1,846	7,690	1,846	0	0	9,536
	8-CONFERENCE CHAIRS									
000067	02/08/2001	SL100FM	7 0	1,261	180	528	180	0	0	706
	DELL INSPIRON 4100-LAPTOP									
000068	01/16/2002	SL100FM	5 0	1,250	250	500	250	0	0	750
	DELL POWEREDGE 1400SC SERVER									
000069	12/31/2002	SL100FM	5 0	817	163	177	163	0	0	340
	DELL DIMENSION 2350 COMPUTER (10)									
000073	12/14/2002	SL100FM	5 0	6,508	1,302	1,410	1,302	0	0	2,712
	Two Filing Cabinets Office Max									
000074	07/03/2003	SL100FM	7 0	1,508	215	108	215	0	0	323
	filing cabinet - give something back									
000075	10/01/2003	SL100FM	7 0	685	98	24	98	0	0	122
	SHARP COPIER AR-407 W/ MOVING FEE									
000076	04/15/2004	SL100FM	5 0	1,020	153	0	153	0	0	153
	INSPIRON 600M LAPTOP W/EXTRA MOUSE & KEYPAD									
000077	10/21/2004	SL100FM	5 0	1,266	63	0	63	0	0	63
	LATITUDE D505 LAPTOP W/EXTRA MEMORY									
000078	11/12/2004	SL100FM	5 0	1,394	46	0	46	0	0	46
	DELL PROJECTOR FOR LAPTOP									
	12/01/2004	SL100FM	5 0	727	12	0	12	0	0	12
Less Disposals	Adjustment to eliminate cost values of disposed assets									
				-4,565						
Subtotal: OFFC (37)				57,842	4,845	42,625	4,845	0	-4,500	42,871
Class: PAINT										
000003										
	TWO FILES, COAT RACK									
000017	12/02/1990	SL100FM	5 0	297	0	297	0	0	0	297
	HP LASERJET - 5M									
000036	01/27/1997	SL100FM	5 0	517	0	517	0	0	0	517
	COMPUTER (Zoommax)									
000044	07/14/1998	SL100FM	5 0	1,250	0	1,250	0	0	0	1,250
	WALNUT DESK w/HUTCH #1									
000056	12/09/1998	SL100FM	7 0	350	50	254	50	0	0	304
	COMPUTER SYSTEM									
	09/29/1999	SL100FM	5 0	1,220	163	1,057	163	0	0	1,220

Asset ID	Placed In service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depr & AFYD This Period	YEAR TO DATE				
						Beginning Accum Depr	Current Depr & AFYD	Net Sec 179/Sec 179A	Net Additions Deductions	Ending Accum Depr
Class: PAINT										
000057	HP OFFICE JET R80									
	11/05/1999	SL100FM	5 0	817	138	681	136	0	0	817
000059.1	HP PAVILION COMPUTER (2)									
	03/04/2000	SL100FM	5 0	689	35	528	35	0	-563	0
000059.2	HP PAVILION COMPUTER (2)									
	03/04/2000	SL100FM	5 0	689	138	528	138	0	0	666
000060	IOMEGO INT ATAPI ZIP									
	03/04/2000	SL100FM	5 0	0	0	0	0	0	0	0
000061	POWER WASHER									
	03/24/2000	SL100FM	5 0	819	164	628	164	0	0	792
000062	PAINT SPRAYER									
	03/24/2000	SL100FM	5 0	862	172	661	172	0	0	833
000063	POWER WASHER									
	03/27/2000	SL100FM	5 0	819	164	628	164	0	0	792
000064	PAINT SPRAYER									
	03/27/2000	SL100FM	5 0	862	172	661	172	0	0	833
Less Disposals	Adjustment to eliminate cost values of disposed assets									
				-689						
Subtotal: PAINT (14)				8,501	1,194	7,689	1,194	0	-563	8,320
Grand Total				120,481	7,860	101,255	7,860	0	-5,562	103,553

Note: There may be differences due to rounding.